

CALIFORNIA TAHOE CONSERVANCY

PREQUALIFICATION FORM FOR APPLICANTS FOR LAND COVERAGE

*** Pre-Qualification Forms will be treated on a “First-come, first-served” basis.**

Hydrologic Area: (circle one)

<input type="checkbox"/> Emerald Bay	<input type="checkbox"/> McKinney Bay
<input type="checkbox"/> South Stateline	<input type="checkbox"/> Tahoe City
<input type="checkbox"/> Upper Truckee	<input type="checkbox"/> Agate Bay
<input type="checkbox"/> Tahoe Keys (check if applicable)	

Date of Sale: _____, 2011

Please complete and return this form to the Conservancy offices at the address listed below. You should complete a separate form for each site to which you wish to transfer coverage.

Mail or deliver the form to: California Tahoe Conservancy
Attn: Land Bank Program
1061 Third Street
South Lake Tahoe, CA 96150
(530) 542-5580 (main line)
(530) 542-5567 (fax)

1. Project Identification

Please identify the property to which you would be applying the coverage:

Address: _____
Lot No.: _____
Subdivision: _____
County: _____
APN: _____

If you have filed for a building permit with the Tahoe Regional Planning Agency or one of the local agencies in the Tahoe Basin, please fill in the following blanks:

Permit or Application No.: _____

Name of Applicant: _____

2. Eligibility Criteria

Do you have current project plans to develop the above property, requiring a transfer of coverage?

yes / no (circle one)

Do you intend to obtain a TRPA or local agency building permit for the project within the next year?

yes / no (circle one)

3. Coverage Needs of Project

Bailey Classification (if applicable):

IPES Score (if any):

Area of the Property:

Allowable Base Coverage:

Allowable Coverage with Transfer:

Existing Coverage:

Proposed Coverage:

Amount of Coverage proposed to be transferred **on site**:

(**off-site** coverage can be mitigated by means other than coverage transfer)

Have you obtained or contracted for transfer of coverage from any other source?

yes / no (circle one)

If so, how much?

4. Has a Negative Declaration or Environmental Impact Report been filed for this project?

yes / no (circle one)

5. Identification of Applicant

The following information should be supplied for the person who will be purchasing coverage on behalf of the above project:

Name, address, and telephone number of applicant:

Name: _____

Address: _____

Telephone: _____

Relationship of applicant to identified project:
(check all that apply)

Applicant is:

- _____ the owner of the property
_____ agent or attorney-in-fact for owner
- _____ under contract to purchase the property
_____ agent or attorney-in-fact for party with
contract to purchase the property
- _____ agent or attorney-in-fact for permit holder

6. Documentation

Please return, along with this form, the following materials to assist us in our review:

- proof of ownership (Copy of Grant Deed)
- copy of project plans (or at least a copy of the Preliminary Site Plan page showing the coverage calculations)
- evidence of TRPA allocation (new residential construction)
- copy of application or confirmation from TRPA of additional IPES points obtained, if IPES score is less than 726. If Bailey, submit copy of Verification or Assessment
- copy of "conditional permit" specifying amount of coverage to be transferred (if such a permit has been issued. Ex: lakefront remodel, building department checklist, etc.)
- copy of TRPA, City or County permit application, with evidence of filing (e.x.: receipt). (Evidence of filing must be received by CTC no later than 2 weeks after opening escrow.)

7. Coverage sought

For this project I am interested in purchasing:

- _____ square feet of *potential coverage* (residential project)
- _____ square feet of *hard coverage* (commercial project)
- _____ square feet of *stream environment zone restoration credit*
- _____ square feet of *Class 1, 2, or 3 restoration credit*

I understand that the amount of coverage which I propose to purchase is subject to the review and approval of the Conservancy. I further understand that I will not be able to purchase more than the amount of coverage which has a reasonable possibility of being needed for the above project and which can be transferred onto the subject property.

8. Interest in other rights

I may be interested in purchasing the following rights from the Conservancy:

- _____ Commercial Floor Area
- _____ Residential Development Rights
- _____ Other

Applicant: _____

Date: _____

* * * * *

If there are any questions regarding this form, please contact Amy Cecchettini or Gerry Willmetts at the Conservancy, (530) 543-6033 or 543-6042.